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CONFIRMATION NO. 5128

<b>SERIAL NUMBER</b> 10/711,129	<b>FILING OR 371(c) DATE</b> 08/26/2004 <b>RULE</b>	<b>CLASS</b> 356	<b>GROUP ART UNIT</b> 2877	<b>ATTORNEY DOCKET NO.</b> A4-1811	
<b>APPLICANTS</b> Terrance R. Kinney, South Bend, IN; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/481,485 10/08/2003 <i>BM</i> <b>** FOREIGN APPLICATIONS *****</b> <i>ADONE</i> <i>BM</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> <b>** SMALL ENTITY **</b> 09/28/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>                    </u> Initials		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 27127					
<b>TITLE</b> SELF-CALIBRATING OPTICAL REFLECTANCE PROBE SYSTEM					
<b>FILING FEE RECEIVED</b> 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		